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## GENTRAL HEADOUARTERS UNITED STATES ARMY FORCES, PACIFIC OFFICE OF THE CHIEF SURGEON

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## PSYCHIATRIC CARR IN FORWARD ECHTLONS

l. Experience has demonstrated the importance of keeping patients with psychiatric combat reactions under division control for treatment, evacuating further back only those cases in which the prognosis is poor, i.e. evacuating only on medical indications. An unnecessary loss of manpower occurs through undue excessive evacuation under the following conditions:

a. When battalion and regimental surgeons unnecessarily send back mild cases who are amenable to treatment forward of the

clearing station.

b. When the clearing station does not provide for flexible expansion to handle a sudden rush of psychiatric admissions.

c. When troops are moving forward rapidly, and there are frequent changes in location of the clearing station.

d. When the psychiatric rate is excessive.

- 2. A clearing station in a stable situation can handle 15 to 20 psychiatric cases every day, or 450 to 600 cases a month indefinitely, provided there is acceptance of the principle that the clearing station is the place of choice for such treatment. If admissions exceed 30 a day, even for a few days, the facilities of the clearing station will soon be overtaxed. A division rest camp will help to meet these periods of emergency.
- 3. An evacuation hospital in support of a division can take care of the normal flow of psychiatric casualties, i.e. of the severe cases evacuated from the clearing station for medical reasons. It will not be able to handle mass evacuations which occur when conditions exist as enumerated under paragraph 1 above.
- 4. The organization of mobile psychiatric treatment teams is an effective supplement to the division medical service in the care and treatment of psychiatric patients during combat operations. These teams should consist of from one to two psychiatric officers (3130) and five to six well-qualified enlisted personnel (MOS 263).
- 5. To provide proper care and treatment of psychiatric patients in the division, a special psychiatric field unit is unnecessary unless there is a prolonged period of highly intensive fighting. During these periods, it will be necessary to establish a complete medical unit, such as a field hospital or a separate clearing company, to provide proper care and treatment of psychia-

tric patients. During the combat operations on Okinawa a field hospital was used for this purpose and proved to be highly desirable and effective in conserving ranpower by return to duty of a high percentage of psychiatric patients who otherwise would have been evacuated.

6. The attached scheme presents the structure of the above organization at the Corps level.

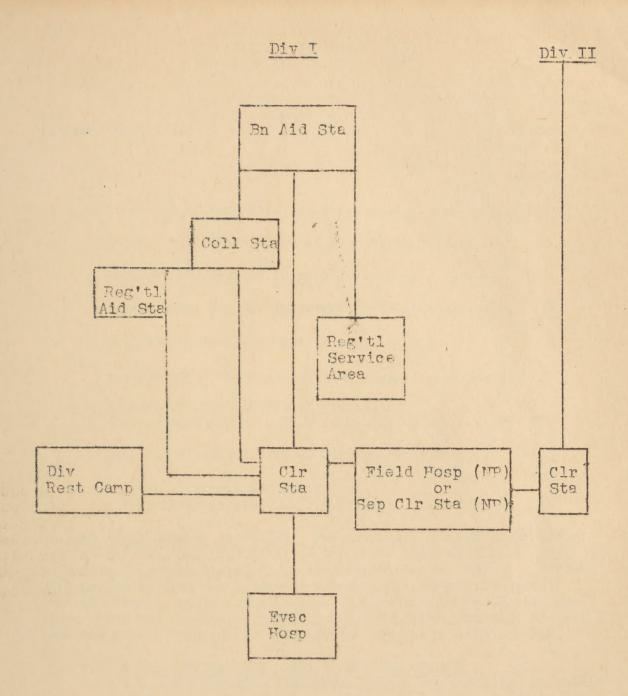
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